

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | JH       |        | 11-26-01 |
| O.I.P.E. CLASSIFIER       |          | 43     | 12/3/01  |
| FORMALITY REVIEW          | M.K.     | 1107   | 12/06/01 |
| RESPONSE FORMALITY REVIEW | A.T.     | 1071   | 02/08/02 |

INDEX OF CLAIMS

|   |                            |   |              |
|---|----------------------------|---|--------------|
| ✓ | Rejected                   | N | Non-elected  |
| = | Allowed                    | I | Interference |
| - | (Through numeral) Canceled | A | Appeal       |
| + | Restricted                 | O | Objected     |

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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